

02

Centre for Research (CFR)  
and  
Advisory Committee for Professional Grooming (ACPG)  
Maitreyi College (Accredited A++ by NAAC), University of Delhi

**Notice for Educational Trips 2023-24**

To endorse experiential learning and encourage research acumen among students, CFR and ACPG are inviting applications from all the departments for organizing educational trips for the session 2023-24 restricted only to **DELHI-NCR**. The application should be addressed to Coordinator, CFR and should include the following essential information such as name of the place, details of the students (course and year), accompanying faculty names and tentative date of the visit. Application should also include few lines emphasizing the significance of the visiting place and the trip.

Please note that all departments in which educational trips or site visits are a part of the syllabus are suggested to conduct the same and mention the paper name and details in the application.

Last date for submission of application is October 10, 2023. Applications should be submitted to Kantaji in office.

Kindly note:

1. The students going for the trip are required to fill a consent form available in the office.
2. A detailed report of the visit including the geotagged photographs in docx as well as pdf format is to be emailed to CFR at [research.maitreyi@gmail.com](mailto:research.maitreyi@gmail.com) after the trip.



Prof. Haritma Chopra

Coordinator

**MAITREYI COLLEGE  
UNIVERSITY OF DELHI  
CHANAKYAPURI, NEW DELHI -110021**

**CONSENT OF PARENTS/GUARDIAN**

This is to certify that my daughter \_\_\_\_\_, student  
of \_\_\_\_\_ at Maitreyi College is going to \_\_\_\_\_  
as part of an educational trip of Maitreyi College, University of Delhi.

I hereby give my consent for the same and I do hereby undertake that in case of any untoward  
incident or eventuality, the College/University of Delhi shall not be held responsible/liable.

I further state that my daughter is medically fit to travel and does not suffer from any  
ailment/illness which requires immediate medical attention.

My daughter will be responsible for herself and her belongings.

Signature of Parent/Guardian:

Mobile numbers of Father/Mother/Guardian:

Mobile number of Student:

Dated: